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**CONFIRMATION NO. 4161**

SERIAL NUMBER 09/664,165	FILING DATE 09/18/2000  RULE	CLASS 709	GROUP ART UNIT 2154	ATTORNEY DOCKET NO. PD-990184
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/181,597 02/10/2000  
 and claims benefit of 60/220,026 07/21/2000

*yes, vr.*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

*None, vr.*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

**\*\* 11/06/2000**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	DRAWING	CLAIMS	CLAIMS	
Verified and Acknowledged Examiner's Signature	<i>[Signature]</i>	MD	3	32	2

**ADDRESS**

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**TITLE**

Selective spoofer and method of performing selective spoofing

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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